

# **DRAFT**

# **Comprehensive State Plan**

## **2014-2020**

**Presentation to the**  
**State Board of Behavioral Health and Developmental**  
**Services**

**October 2013**

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# Comprehensive State Plan Statutory Requirement

The Code of Virginia §37.2-315 directs the Department to produce and biennially update a comprehensive six year plan. The Plan must:

- Identify services and supports needs of individuals with mental health or substance use disorders or intellectual disability;
- Propose strategies to meet these needs; and
- Define resource requirements for behavioral health and developmental services

Focus of the Comprehensive State Plan 2014-2020:

- Implementation of the Creating Opportunities strategic initiatives; and
- Implementation of Department initiatives such as DOJ settlement agreement requirements and the state facility electronic health record system

Biennial update cycle (odd years) conforms to the Department's biennial budget development process

# Plan Update Process

Timeframe	Activity
December 2012	Planning and Budget Committee reviewed the update process and timeframe and discussed critical issues facing the behavioral health and developmental services system
January – April 2013	CSBs completed a web-based waiting list survey
April 2013	Planning and Budget Committee reviewed prevalence estimates, services utilization and demographic profile updates and critical issues and strategic initiatives for the plan update
May-June 2013	DBHDS, for the first time, compiled a consolidated wait list of all individuals on the CSB developmental services and IDOLS ID waiver wait lists
May – June 2013	DBHDS updated services system characteristics and utilization information
May – June 2013	DBHDS developed critical issue background information, goals, objectives, and action steps
July 2013	The Planning and Budget Committee reviewed preliminary CSB waitlist survey
July – September 2013	DBHDS finalized draft plan update
October 2013	The Planning and Budget Committee and full Board receive the draft plan update
October 2013	Services system stakeholders notification that the draft plan has been posted on the DBHDS website for public comment (October 11-November 8)
December 2013	Planning and Budget Committee and full Board review public comment summary, revisions to the draft plan, and the final plan update

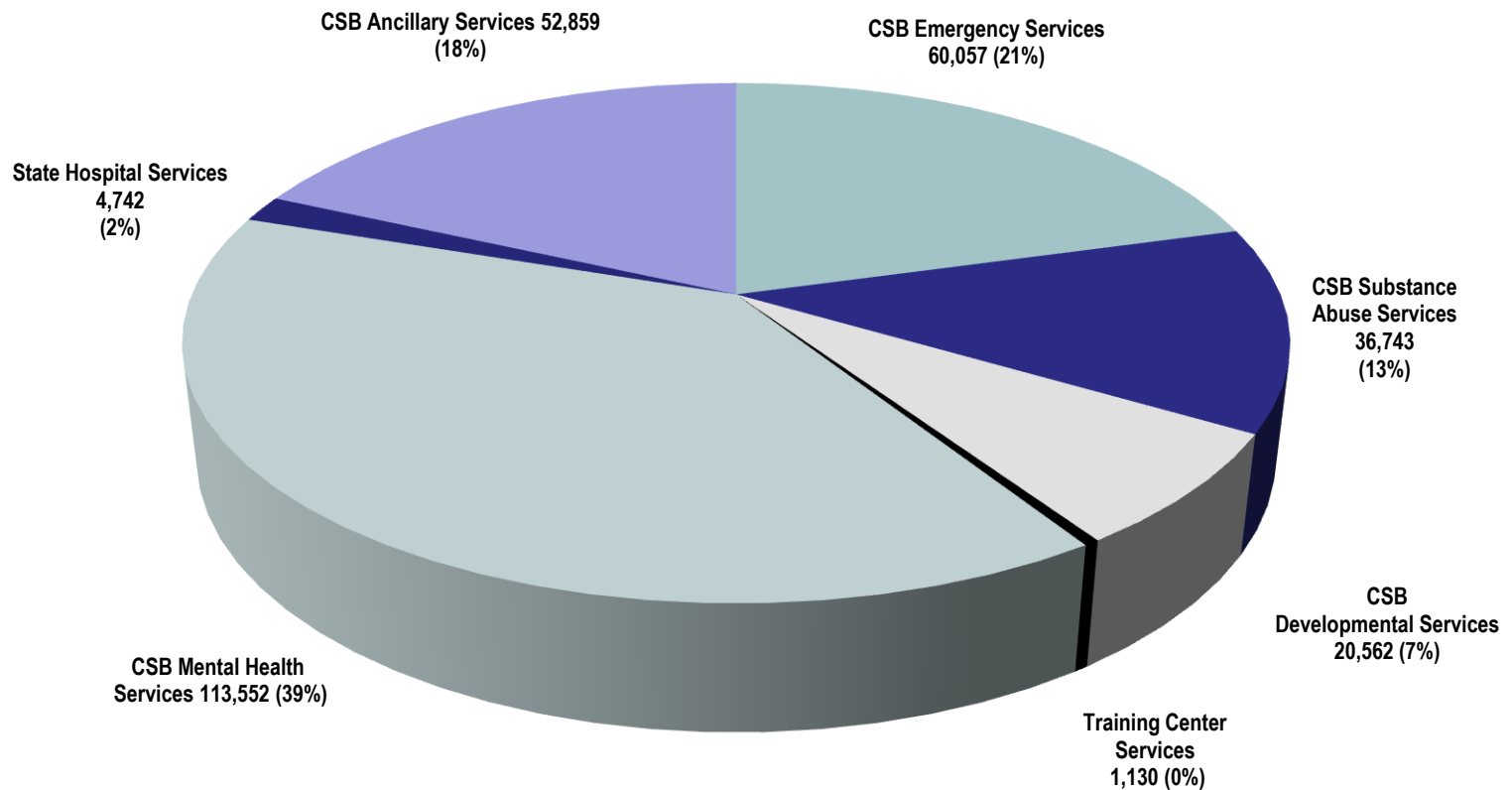
# Comprehensive State Plan Organization

- **Executive Summary**
  - Four page summary of the draft plan, including services system initiatives and resource requirements
- **Introduction**
  - Plan purposes and development process
- **Services System Overview**
  - Services system structure; state facility and CSB service utilization and trends; characteristics of individuals receiving services; state, local, and private partnerships; and funding
- **Prevalence Estimates**
  - Serious mental illness or serious emotional disturbance, intellectual disability or other developmental disability, substance use disorder
- **Services and Supports Needs**
  - CSB waiting lists, average wait time for CSB services, other indicators of need, and anticipated services system

- **Services System Transformation**
  - Integrated Strategic Plan and Creating Opportunities Plan strategic initiatives
- **Services System Critical Issues and Strategic Initiatives**
  - Systemwide
  - Behavioral Health Services
  - Developmental Services
  - Civil Commitment of Sexually Violent Predators
  - Department Initiatives
- **Resource Requirements**
  - Capacity development priorities
- **Conclusion**
  - Continue process in advancing a community-focused services system
- **Appendices**
  - Detailed data about the services system

# Overview Includes Information on Individuals Receiving CSB and State Facility Services FY 2012

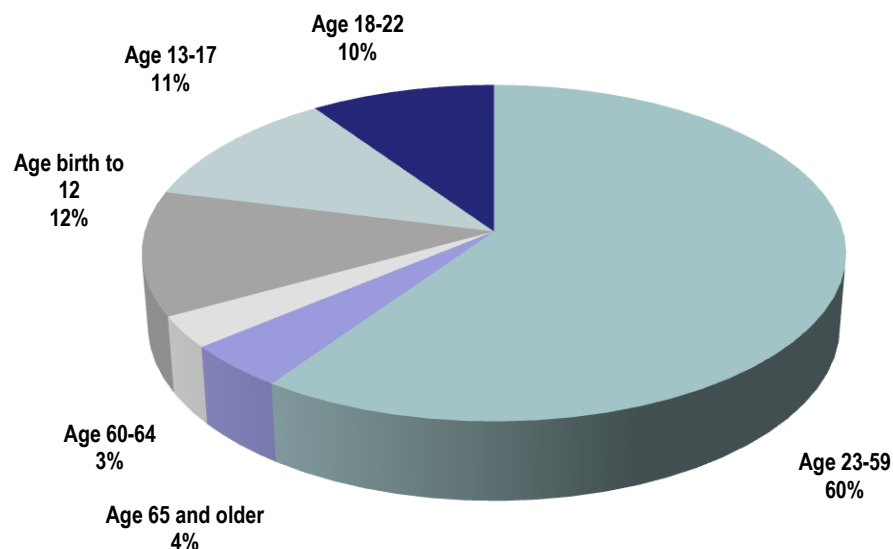
## Individuals Receiving Services from State Facilities and CSBs



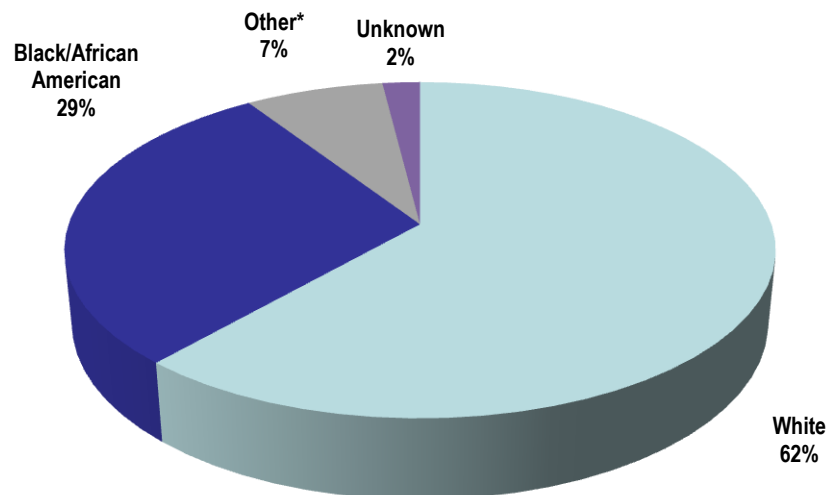
Note: Ancillary services include CSB motivational treatment, consumer monitoring services, assessment and evaluation, early intervention services, and consumer run services

# Overview Includes Age and Racial Distribution of Individuals Receiving Services FY 2012

**Age Distribution of Individuals Receiving CSB and  
State Facility Services**



**Racial Distribution of Individuals Receiving CSB and  
State Facility Services**

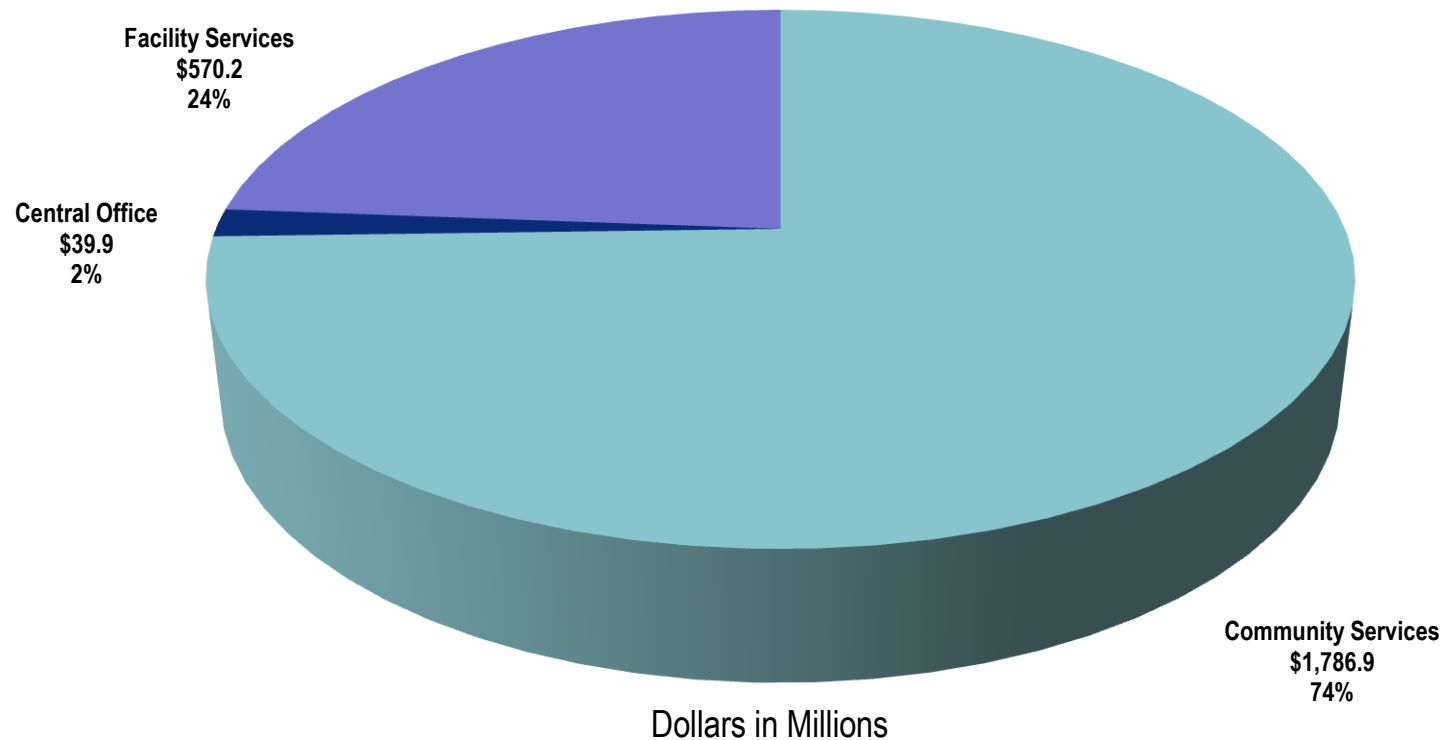


Other includes American Indian, Alaskan Native & Other Racial

CSBs served 10,124 (4.7%) and the facilities served 158 (2.7%) individuals who were of Hispanic origin

# Funding for Community and Facility Services and the Central Office

## Total FY 2012 Behavioral Health and Developmental Services System Funding\* - \$2.397 Billion



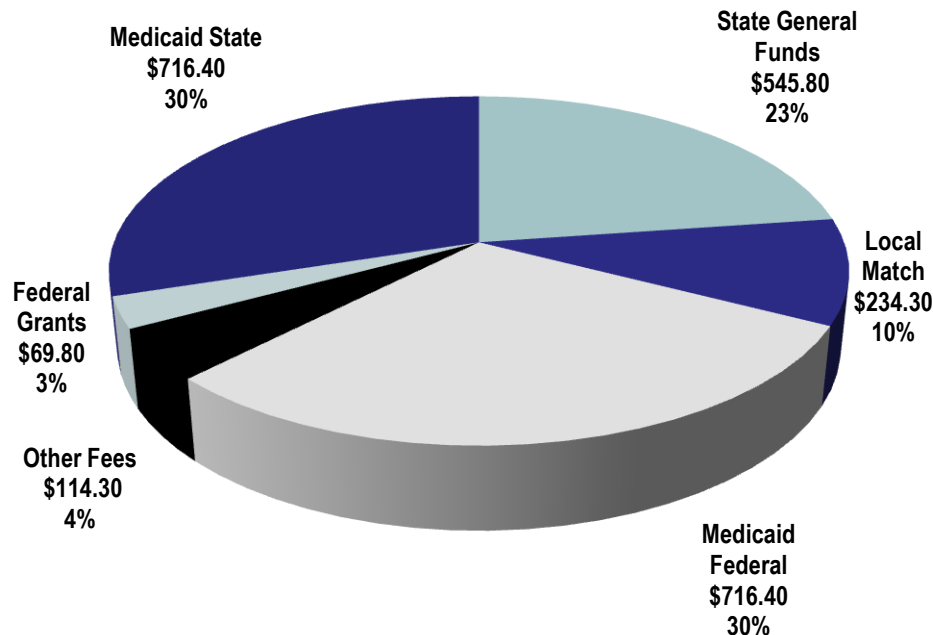
\* Includes DBHDS final adjusted appropriation, local matching funds, all fees, and Medicaid payments to private vendors



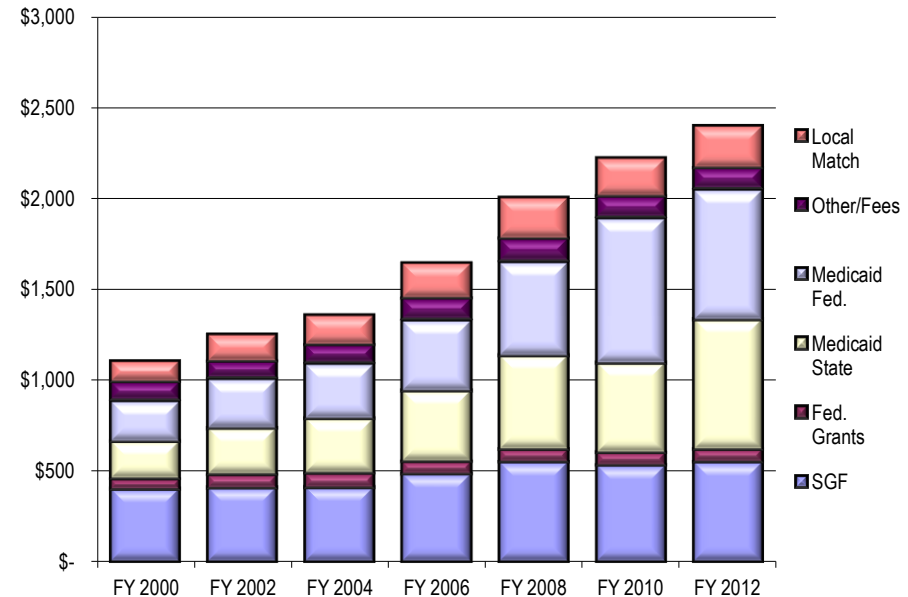
# Services System Funding by Fund Source

Dollars in chart and table are in millions

**Total FY 2012 Behavioral Health and  
Developmental Services System  
Funding by Fund Source**  
**\$2.397 Billion**



**Total Services System Funding Trends  
by Funding Source**  
**FY 2000 – FY 2012**



# Prevalence Estimates

Based on National Studies and Weldon Cooper 2012 Population Estimates

Diagnosis/Disability	Prevalence Estimate
Serious Mental Illness	341,773 adults
Serious Emotional Disturbance	Between 117,592-143,724 children and adolescents (65,329 to 91,461 have extreme impairment)
Intellectual Disability	76,763 individuals (ages 6 and older)
Developmental Disability	147,346 individuals
Developmental Delays Requiring Early Intervention Services	116,190 infants and toddlers (ages birth through 3)
Illicit Drug Abuse/Dependence	175,234 adults and adolescents (ages 12 and older) (122,112 met dependence criterion)
Alcohol Abuse/Dependence	477,409 adults and adolescents (ages 12 and older) (209,729 met dependence criterion)

# Numbers of Individuals on CSB Waiting Lists January-April 2013

Population	Total on Waiting List
<b>CSB Mental Health Services Waiting List Count</b>	
Adults	3,218
Children and Adolescents	1,268
Total Waiting for Mental Health Services	<b>4,486</b>
<b>CSB Developmental Services Waiting List Count</b>	
Adults on Waiver Waiting List (IDOLS)	3,883
Children and Adolescents on Waiver Waiting List (IDOLS)	2,791
Adults and Children Not on the IDOLS Waiting List	1,421
Total Waiting for Developmental Services	<b>8,095</b>
<b>CSB Substance Abuse Services Waiting List Count</b>	
Adults	1,021
Adolescents	83
Total Waiting for Substance Abuse Services	<b>1,104</b>
<b>Grand Total on All CSB Services Waiting Lists</b>	<b>13,685</b>

# Systemwide Strategic Initiatives

- Implement the Patient Protection and Affordable Care Act and other **health care reforms** in ways that protect the existing health care safety net for individuals with behavioral health or developmental service needs.
  - Health reform initiatives
  - Integrated primary care and behavioral health care
- Enhance the capacity of the behavioral health and developmental services system to **improve quality of care**.
  - Systemwide quality improvement process
  - Licensing and human rights efficiencies and effectiveness
  - Systems to collect and analyze data about individuals receiving services under the DOJ settlement agreement
  - Data dashboard

## Systemwide Strategic Initiatives - continued

- Strengthen the capability of the **case management system** to support individuals receiving behavioral health or developmental services.
  - Core case management competencies and practice consistency
  - Case management settlement agreement requirements
- Address **housing needs** for individuals with mental health and substance use disorders and those with developmental disabilities.
  - Permanent supportive housing options
  - Independent housing options for individuals served under the settlement agreement
- Create **employment opportunities** for individuals with mental health or substance use disorders and those with developmental disabilities.
  - Employment First
  - Employment opportunities for individuals receiving behavioral health or developmental services

# Behavioral Health Services Strategic Initiatives

- Enhance statewide consistency, availability, and accessibility of **recovery-oriented behavioral health services** and supports across Virginia.
  - Recovery-oriented system of behavioral health services and supports
  - Emergency response and crisis prevention and diversion capability
  - Statewide availability of behavioral health services
  - Services and supports for veterans
  - Comprehensive continuum of specialized older adult community services
  - Services to prevent or reduce criminal justice system involvement
  - Service for offenders released from correctional facilities
- Enhance access to the full comprehensive array of **services and supports for children and adolescents** across the Commonwealth.
  - Consistent array of child and adolescent services
  - Infant and toddler intervention (Part C) services

# Behavioral Health Services Strategic Initiatives - continued

- Increase the statewide availability of **substance abuse services**.
  - Consistent array of substance abuse treatment services
  - Interagency partnerships to serve individuals with substance use disorders
  - Prevention services
- Increase use of peers in direct service roles and expand **recovery support services** across the Commonwealth.
  - Opportunities for individual and family involvement
  - Quality and quantity of peer support service providers
  - Department focus on Peer Services and Recovery Supports
- Increase the effectiveness and efficiency of **state hospital services**.
  - High quality state hospital services
  - State hospital annual consultative audits
  - Alternatives to appropriately divert forensic and older adult admissions

# Developmental Services Strategic Initiatives

- Transform to a community-based system that will enable individuals who need **developmental services and supports** to live a life that is fully integrated in the community.
  - Community developmental services and supports
  - Quality and effectiveness of developmental services
- Assure the safe and successful **transition of individuals currently residing at a training center** to the most integrated community settings appropriate to their needs and desires.
  - Discharge planning and community transition protocols
  - Training center closure plan
  - High quality training center services
  - Training center annual consultative audits



# Civil Commitment of Sexually Violent Predators

- Address SVP service capacity issues in order to appropriately access and safely operate the **Virginia Center for Behavioral Rehabilitation** and provide SVP rehabilitation services.
  - Evidence-based SVP treatment, employment and vocational training in a safe and secure setting
  - Safe and appropriate use of conditional release of eligible residents

# Department Initiatives

- Improve the Department's capability to develop, deploy, and adopt **information technology systems** solutions that support service delivery and improve business.
  - Implement OneMind, the Department's electronic health record system
  - Align with eHHR project objectives and services
  - Enterprise data warehouse and business intelligence
- Assure that Virginia's **behavioral health and developmental services workforce** has the leadership, clinical, and direct support skills and expertise to provide needed services and supports.
  - Increase workforce skills and productivity
  - Services system cultural and linguistic competence
- Provide **state facility infrastructure** that efficiently and appropriately meets the needs of individuals receiving services.
  - Capital infrastructure improvements

# Resource Requirements

## Behavioral Health Capacity Priorities

- Expand **statewide mental health services capacity** to fill identified services gaps, including:
  - individual and group psychotherapy, family counseling, supportive counseling, psychiatry and medication services for older teens and young adults during the difficult period of transition from school to adulthood;
  - Programs of Assertive Community Treatment (PACT) teams in communities that now lack this essential intensive service;
  - therapeutic assessment centers (drop-off centers);
  - early intervention services (Part C);
  - discharge assistance;
  - permanent supportive housing assistance;
  - extended care for individuals under a temporary detention order; and
  - enhanced forensic-related evaluation rates.

# Resource Requirements

## Behavioral Health Capacity Priorities - continued

- Expand statewide **substance abuse intensive outpatient treatment**, including
  - earlier access to assessment and intensive outpatient services within the Systems of Care framework for youth with substance abuse and co-occurring disorders;
  - rehabilitation and employment capacity to help persons in recovery from alcohol and drug addiction find and keep jobs; and
  - community-based residential medical detoxification.
- Expand **peer support recovery services** for persons with mental health, substance use, or co-occurring disorders
- Cover increased **WSH and CCCA costs** incurred with new WSH facility.
- Recover **lost Medicaid revenues** associated with the diminishing geriatric population at ESH.

# Resource Requirements

## Developmental Services Capacity Priorities

- Collaborate with DMAS to **expand waiver capacity**, modify existing or create new waivers, and address waiver rate structures.
- Expand **developmental services capacity** to implement the settlement agreement with the DOJ, including
  - family supports,
  - rental subsidies,
  - crisis stabilization, and
  - quality management and independent review.
- Establish community-based regional **Developmental Disability Health Supports Network** clinical teams to provide or facilitate access to local professionals providing medical, dental, and other clinical services; behavioral and other supports; and specialized equipment.
- Provide **housing bridge funds** to support transition of individuals residing at NVTC to integrated community settings.

# Resource Requirements

## VCBR and Systemwide Capacity Priorities

- Cover **conditional release services and supervision** at the point that an individual's probation obligation by the Department of Corrections (DOC) ends.
- Support ongoing operation of the Department's **electronic health record system** (EHRS).
- Upgrade **regional IT security staffing and processes** to meet federal and state requirements.
- Support Department's interface with the state's new **financial information system**.

# Conclusion

- The Comprehensive State Plan 2014-2020 fulfills the Department's statutory requirement to biennially update its six year plan.
- The plan also supports the State Board's responsibility to ensure the development of long-range programs and plans for mental health, intellectual disability, and substance abuse services provided by the Commonwealth and by CSBs.
- The draft plan is posted for public review and comment on the Department's website.
- In December, the Board will receive summaries of public comments and considered changes proposed by the Department in response to this comment.